



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
**DATAMASTER MAINTENANCE REPORT**

BREATH ALCOHOL PROGRAM

JUN 5 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN <b>204086</b>	SIMULATOR: GUTH 34C SN: 60444 INVENTORY # 127202	DATE OF INSPECTION <b>05-30-09</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>OLA 10 &amp; HWY 10, WOOD HEIGHTS, MO.</b>		TIME OF INSPECTION <b>2154</b>

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <b>49</b> °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) <b>34.1°C</b>	

CALIBRATION CHECK -  
Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE  
 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE  
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 <input checked="" type="checkbox"/> <b>.096</b>	TEST 2 <input checked="" type="checkbox"/> <b>.096</b>	TEST 3 <input checked="" type="checkbox"/> <b>.096</b>
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PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS <b>0</b>	(0-.04) <b>0</b>	(.05-.09) <b>0</b>	(.10-.14) <b>0</b>	(.15-.19) <b>0</b>	(Over .19) <b>0</b>
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

**MEETS DOHSS REQUIREMENTS.**

**GUTH LABORATORIES, INC., 10 SOLUTION, LOT #08240, BOT #622, MFG. 7/14/08, EXP. 7/14/09.**

INSPECTING OFFICER	
SIGNATURE <b>CAL. NEIL K. JOHNSON #1112</b>	PRINT NAME <b>CAL. NEIL K. JOHNSON #1112</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>720214 10-16-09</b>	TELEPHONE NUMBER <b>(816) 622-0800</b>

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204086  
05/30/09

TESTING OFFICER:

JOHNSON/NEIL/K

OFFICER I.D.: 1112

PERMIT NUMBER: 720214

EXPIRATION DATE: 10/16/09

MISCELLANEOUS DATA:

GUTH, .10, LOT 08240

BOT. 622, EXP. 7/14/09

--- SUPERVISOR MODE ---

BLANK TEST	.000	21:58
INTERNAL STANDARD	VERIFIED	21:58
EXTERNAL STANDARD	.096	21:59
BLANK TEST	.000	21:59
EXTERNAL STANDARD	.096	22:00
BLANK TEST	.000	22:00
EXTERNAL STANDARD	.096	22:01
BLANK TEST	.000	22:01

N = 3

SIM. = .1

AVG. = .096

Operator Signature

*CPL. Neil K. S. #112*

2209-02

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204086  
05/30/09  
21:54

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

HEATERS  
SAMPLE CHAMBER: 49C

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!#\$%&'()\*+,-./0123456789:;<=>?@ABCDEF  
GHIJKLMNOPQRSTUVWXYZ[\]^\_`abcdefgijklmnop  
qrstuvwxyz{|}~

Operator Signature

*CPL. Neil K. S. #112*

2209-02

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204086  
05/30/09

ARREST TIME: 21:35  
SUBJECT NAME:  
ME

DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/0987654321  
ARRESTING OFFICER:  
ME

OFFICER I.D.: ME  
TESTING OFFICER:  
JOHNSON/NEIL/K

OFFICER I.D.: 1112  
PERMIT NUMBER: 720214

EXPIRATION DATE: 10/16/09  
MISCELLANEOUS DATA:  
SELF TESTS

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:09
INTERNAL STANDARD	VERIFIED	22:09
SUBJECT SAMPLE	.000	22:09
BLANK TEST	.000	22:10

Operator Signature

*Cal. Neil K. #1112*

2008-02

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204086  
05/30/09

ARREST TIME: 21:30  
SUBJECT NAME:  
ME

DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/0987654321  
ARRESTING OFFICER:  
ME

OFFICER I.D.: ME  
TESTING OFFICER:  
JOHNSON/NEIL/K

OFFICER I.D.: 1112  
PERMIT NUMBER: 720214

EXPIRATION DATE: 10/16/09  
MISCELLANEOUS DATA:  
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:05
INTERNAL STANDARD	VERIFIED	22:05
RADIO INTERFERENCE		

Operator Signature

*Cal. Neil K. #1112*

2008-02



GUTH LABORATORIES, INC.  
 80 NORTH 6TH STREET • HARRISBURG, PA 17114-4041 • TELEPHONE 773-5644-6700

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08240 of

Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1221 percent (w/vol) ethyl alcohol. The expiration date for this lot number is July 14, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

*Ted L. Pauley*  
 Ted L. Pauley, President  
 GUTH LABORATORIES, INC.



State of Missouri  
 DEPARTMENT OF HEALTH  
 P E R M I T  
 TYPE II



NEIL JOHNSON

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air, issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 10/16/07  
 Number 220214  
 Expires 10/16/2009  
 MO 20-0771 (7-83)

*T. L. Pauley*  
 Director of State Public Health Laboratory  
 Director, Department of Health  
 Lab. 4 (8/9/46)